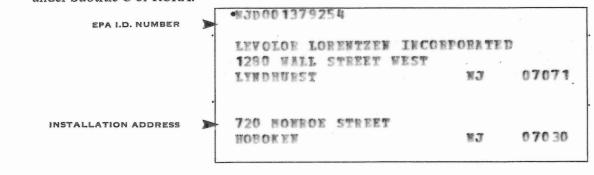


## ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.



EPA Form 8700-12B (4-80)

10/09/80

SEPA	OLS. ENVIRONMENTAL PROTECTION AGENCY NOTIFICATION OF HAZARDOUS WASTE ACTIVITY				INSTRUCTIONS: If you received a preprinted		
IN TALLA- TION'S EPA I.D. NO.						label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is	
I. STALLATION	Levolor Lorentzen, Inc.					complete a below blan	and correct, leave Items I, II, and III k. If you did not receive a preprinted
INSTALLA- TION II. MAILING ADDRESS	1280 Wall St. West; Lyndhurst, NJ 07071 PLEASE PLACE LABEL IN THIS SPACE				label, complete all items. "Installation" means a single site where hazardous waste is generated, treated; stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).		
LOCATION III OF INSTAL- LATION	720 Monroe Street; Hoboken, NJ 07030						
FOR OFFICIAL	USE ONLY					Sena	
FOR OFFICIAL		c	OMMENTS				
C 15 16			LOATER	ECEIVED			35
INSTALLATION	ON'S EPA I.D. NUN	ABER APPROVE	O O O	eceived o., & day)			
I. NAME OF INS	TALLATION	13 14 15 16	17	- 22			NATIONAL PROPERTY OF THE PROPERTY OF
Levolo	r Lore	ntzen I	ncor	por	ated		
II. INSTALLATION	ON MAILING AD	DRESS					67
c		STREET OR P.O. BOX					
3 1 2 8 0	W a 1 1 S	treet W	est,			45	
c	CITY	Y OR TOWN			ST. ZIF	CODE	
4 L y n d h				40	N J 0 7	d 7 1	
III. LOCATION O		ON ET OR ROUTE NUMBE					
5 7 2 0 M		Street					
15 110	CITY	OR TOWN			ST. ZIP	CODE	
6Hobok	e n					030	
IV. INSTALLATI	ON CONTACT	ARTICLE BEEF		40	41 42 47	51	
c	NAME A	ND TITLE (last, first, &	job title)			PHON	NE NO. (area code & no.)
15 16	tter C	PM				201	-460-8400 49-51-8400
V. OWNERSHIP		A. NAME OF INSTA	I LATION'S	LEGAL O	WNED		
8 Le vol	ortor	entzen	Inco	rpo		d	
B. TYPE OF C	OWNERSHIP ite letter into box)	VI. TYPE OF HAZ	ARDOUS W	ASTE AC	CTIVITY (e.	nter "X" in	the appropriate box(es))
F = FEDERAL		X A. GENER	RATION		∑ B	TRANSPOR	TATION (complete item VII)
M = NON-FEL	DERAL M	C. TREAT	/STORE/DIS	POSE	□ D.	UNDERGRO	DUND INJECTION
		ON (transporters only				HARITAL MANAGEMENT	RANKE DEFENDANCE OF
GI A. AIR	B. RAIL	C. HIGHWAY	0. WA	TER	E. OTHER	R (specify):	
VIII. FIRST OR S			r inetallation'	s first notif	ication of haz	ardoue waete	activity or a subsequent notification.
		r your Installation's EPA					occurry or a subsequent normation.
☑A. FIRST	NOTIFICATION	B. SUBSEQU	ENT NOTIF	ICATION (	complete iter	n C)	C. INSTALLATION'S EPA J.D. NO.
IX. DESCRIPTIO		US WASTES provide the requested in			REPLACE	THE REAL	

A HAZARDOUS WASTES waste from non-specific	FROM NON-SPECIFIC	SOURCES. Enter the handles. Use additional	four-digit number from	40 CFR Part 261.31 fo	or each listed hazardous	
1	2	3	A A	5 11 5	6	
F 0 0 1	F 0 0 3	F 0 0 5	F 1 0 7			
7	8	9	10	11	12	
3. HAZARDOUS WASTES specific industrial sources	FROM SPECIFIC SOUT	RCES Enter the lour—des. Use additional sheets	igit number from 40 CFF if necessary.	Part 261,32 for each	listed hazardous waste	from
13	14	ta i	15	17	1 0	
K 0 7 8	K 0 7 9	K 0 8 1	K 0 8 2		23 - 16	
23 - 26	20	21	22	23	24	
25 26	26	27	28 28	29	30	
COMMERCIAL CHEMIC	AL PRODUCT HAZAF	DOUS WASTES. Enter	the four-digit number for	rom 40 CFR Part 201.	33 for each chemical su	al)-
stance your installation h	andles which may be a l	nazardous waste. Use ad	ditional sheets if necessar	γ.		
31	32	33	34	35	36	
U 2 2 8			1 1 26		23 2 26	
37	3.5	391	40	41	42	
43	4.6	45	A6	47	48	
D. LISTED INFECTIOUS V	VASTES. Enter the four	(vis 28.) digit number from 40.	CFH Part 261 34 for each	h listed hazardous was	e from hospitals, veter	inaty
hospitals, medical and re-	search laboratories your	installation handles. Us		1		
49	50		1 52	53	54	
20 26	20 20	23 2 26	23 25	23 2 25		
CHARACTERISTICS OF hazardous wastes your in	NON-LISTED HAZA stellation handles. (See	RDOUS WASTES. Mark 40 CFR Parts 261.21 —	"X" in the boxes corres 261.24.)	ponding to the charact	eristics of non-listed	
Di. IGNITAL		]2. CORROSIVE	[]3. REAC (D003)	TIVE		
K. CERTIFICATION		THE REAL PROPERTY.		4100		The state of
l certify under penalty attached documents, a l believe that the subn mitting false informatio	nd that based on my sitted information is	inquiry of those inc true, accurate, and c	lividuais immediately complete. I am aware	responsible for obt	aining the informati	ion,
NAME & OFFICIAL TITLE (type or print)					DATE SIGNED	
Clean of	8-5-80					
PA Form 8700-12 (8-80)	REVERSE			The second state of the second		Management of the Control of the Con

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## Tear out here

## **ENVIRONMENTAL PROTECTION AGENCY**

## GENERATOR BIENNIAL HAZARDOUS WASTE REPORT FOR 1983

This report is for the calendar year ending December 31, 1983. Read All Instructions Carefully Before Making Any Entries on Form						
I. NON-REGULATED STATUS						
	agement Section Small Quantity Generator  4 Exempt 2 4 1984 5 Beneficial Use 9 Closed					
Please print/type with elite type (12 characters per inch)  This Installation's Non-Regulated Status is Expected to Apply:						
Please print/type with elite type (12 characters per inch)  II. GENERATOR'S EPA I.D. NUMBER						
the state of the s	☐ For 1983 Only ☐ Permanently					
T/A C  F  N  J  D  0  0  1  3  7  9  2  5  4    1    1      1    1    1    1	☐ Other					
	C303 ENTRY (OFFICIAL USE ONLY):					
III. NAME OF INSTALLATION						
<u>Llevollon llonen tzen IIncl</u>	69					
IV. INSTALLATION MAILING ADDRESS						
[3] 1  2  80   W   a   1  1      S   t   r   e  e  t      W   e   s   t	45					
Street or P.O. Box   4   L  y  n  d  h  u  r  s  t	NJ 0   7   0   7   1					
V. LOCATION OF INSTALLATION (if different than section IV	ahove)					
	above					
[5   7   2   0   1   1   0   1   1   0   1   1   1	45					
6   H  0   b  0   k  e  n	1 1 1 1 1 2 0 7 0 3 0					
City or Town	State Zip Code					
VI. INSTALLATION CONTACT						
2   S   z   0   S   t   e   k     D   e   n   n   i   S	45					
2  0  1 -  7  9  2 -  2  6  0  0  46						
Phone No. (area code & no.)						
VII. CERTIFICATION  I certify under penalty of law that I have personally examined and am familiar w documents, and that based on my inquiry of those individuals immediately responsubmitted information is true, accurate, and complete. I am aware that there are including the possibility of fine and imprisonment.	ensible for obtaining the information, I believe that the significant penalties for submitting false information,					
Charles Sondik, Purchasing Manager	5/11/84					

Signature of Authorized Representative

EPA Form 8700-13A(5-80) (Revised 11-83)

Title

Print/Type Name

Page 1 of \_\_

Date Signed

This report is for the calendar year ending December 31, 1983.

Date rec'd:

Rec'd by: \_

VIII. GENERATOR'S EPA I.D. NO.

GNJJD001131719121514 11

X. FACILITY'S EPA I.D. NO.

FNJD000245454544

XI. FACILITY ADDRESS

125 Factory Lane Middlesex, NJ 08846

Marisol Company, Inc.

IX. FACILITY NAME (specify facility to which all wastes on this page were shipped)

XII. TRANSPORTATION SERVICES USED Levolor's own trailors -

EPA #NJD001379254

XIII. WAS	ΓΕ IDENTIFICATION				of .
#	212216,161	B. DOT Hazard	C. EPA Hazardou	IS	Init o
Sequence # en	A. Description of Waste	B. I	Waste No. (see instructions	D. Amount of Waste	E. Unit of Measure
29 32	Compound Lacquer Thinning Liquid	0 <sub>8</sub>	F + O + O + 5	1 42 50 51 1 2 2 5 0 0 59	G
2					
3					
4					
5					
6				+	
7					
8					
9		7000			
10				++	
10		1			100
11					
12					

XIV. COMMENTS (enter information by section number—see instructions)

Specific Gravity = 0.835